IN THE UNITED STATES DISTRICT COURT WESTERN DISTRICT OF ARKANSAS HARRISON DIVISION

SALENIA L. MOORE

PLAINTIFF

v.

CIVIL NO. 17-3035

NANCY A. BERRYHILL, Commissioner Social Security Administration

DEFENDANT

MEMORANDUM OPINION

Plaintiff, Salenia L. Moore, brings this action pursuant to 42 U.S.C. § 405(g), seeking judicial review of a decision of the Commissioner of the Social Security Administration (Commissioner) denying her claims for a period of disability and disability insurance benefits (DIB) under the provisions of Title II of the Social Security Act (Act). In this judicial review, the Court must determine whether there is substantial evidence in the administrative record to support the Commissioner's decision. See 42 U.S.C. § 405(g).

I. Procedural Background:

Plaintiff protectively filed her current application for DIB on May 23, 2014, alleging an inability to work since May 22, 2014, due to fibromyalgia, myofascial pain syndrome, costochondritis and an arthritic neck. (Tr. 80, 160). An administrative hearing was held on November 10, 2015, at which Plaintiff appeared with counsel and testified. (Tr. 36-78).

By written decision dated March 25, 2016, the ALJ found that during the relevant time period, Plaintiff had an impairment or combination of impairments that were severe. (Tr. 20). Specifically, the ALJ found Plaintiff had the following severe impairments: costochondritis, degenerative disc disease of the lumbar spine status/post laminectomy in

2006, degenerative disc disease of the cervical spine with bulge at C3-4, fibromyalgia, depression, and osteoarthritis of the hands. However, after reviewing all of the evidence presented, the ALJ determined that Plaintiff's impairments did not meet or equal the level of severity of any impairment listed in the Listing of Impairments found in Appendix I, Subpart P, Regulation No. 4. (Tr. 21). The ALJ found Plaintiff retained the residual functional capacity (RFC) to:

perform light work as defined in 20 CFR 404.1567(b) except she is limited to jobs involving simple tasks and simple instructions.

(Tr. 22). With the help of a vocational expert, the ALJ determined Plaintiff could perform work as a blending tank tender and a furniture rental clerk. (Tr. 29).

Plaintiff then requested a review of the hearing decision by the Appeals Council, which after reviewing additional evidence submitted by Plaintiff, denied that request on April 19, 2017. (Tr. 1-6). Subsequently, Plaintiff filed this action. (Doc. 1). This case is before the undersigned pursuant to the consent of the parties. (Doc. 5). Both parties have filed appeal briefs, and the case is now ready for decision. (Docs. 9, 10).

The Court has reviewed the entire transcript. The complete set of facts and arguments are presented in the parties' briefs, and are repeated here only to the extent necessary.

II. Applicable Law:

This Court's role is to determine whether the Commissioner's findings are supported by substantial evidence on the record as a whole. Ramirez v. Barnhart, 292 F.3d 576, 583 (8th Cir. 2002). Substantial evidence is less than a preponderance but it is enough that a reasonable mind would find it adequate to support the Commissioner's decision. The ALJ's decision must be affirmed if the record contains substantial evidence to support it. Edwards

<u>v. Barnhart</u>, 314 F.3d 964, 966 (8th Cir. 2003). As long as there is substantial evidence in the record that supports the Commissioner's decision, the Court may not reverse it simply because substantial evidence exists in the record that would have supported a contrary outcome, or because the Court would have decided the case differently. <u>Haley v. Massanari</u>, 258 F.3d 742, 747 (8th Cir. 2001). In other words, if after reviewing the record it is possible to draw two inconsistent positions from the evidence and one of those positions represents the findings of the ALJ, the decision of the ALJ must be affirmed. <u>Young v. Apfel</u>, 221 F.3d 1065, 1068 (8th Cir. 2000).

It is well established that a claimant for Social Security disability benefits has the burden of proving her disability by establishing a physical or mental disability that has lasted at least one year and that prevents her from engaging in any substantial gainful activity. Pearsall v. Massanari, 274 F.3d 1211, 1217 (8th Cir. 2001); see also 42 U.S.C. § 423(d)(1)(A). The Act defines "physical or mental impairment" as "an impairment that results from anatomical, physiological, or psychological abnormalities which are demonstrable by medically acceptable clinical and laboratory diagnostic techniques." 42 U.S.C. § 423(d)(3). A Plaintiff must show that her disability, not simply her impairment, has lasted for at least twelve consecutive months.

The Commissioner's regulations require her to apply a five-step sequential evaluation process to each claim for disability benefits: (1) whether the claimant has engaged in substantial gainful activity since filing her claim; (2) whether the claimant has a severe physical and/or mental impairment or combination of impairments; (3) whether the impairment(s) meet or equal an impairment in the listings; (4) whether the impairment(s) prevent the claimant from doing past relevant work; and (5) whether the claimant is able to

perform other work in the national economy given her age, education, and experience. <u>See</u> 20 C.F.R. § 404.1520. Only if the final stage is reached does the fact finder consider the Plaintiff's age, education, and work experience in light of her residual functional capacity. <u>See McCoy v. Schweiker</u>, 683 F.2d 1138, 1141-42 (8th Cir. 1982), <u>abrogated on other grounds</u> by Higgins v. Apfel, 222 F.3d 504, 505 (8th Cir. 2000); 20 C.F.R. § 404.1520.

III. Discussion:

Of particular concern to the undersigned is the ALJ's RFC determination. RFC is the most a person can do despite that person's limitations. 20 C.F.R. § 404.1545(a)(1). It is assessed using all relevant evidence in the record. Id. This includes medical records, observations of treating physicians and others, and the claimant's own descriptions of her limitations. Guilliams v. Barnhart, 393 F.3d 798, 801 (8th Cir. 2005); Eichelberger v. Barnhart, 390 F.3d 584, 591 (8th Cir. 2004). Limitations resulting from symptoms such as pain are also factored into the assessment. 20 C.F.R. § 404.1545(a)(3). The United States Court of Appeals for the Eighth Circuit has held that a "claimant's residual functional capacity is a medical question." Lauer v. Apfel. 245 F.3d 700, 704 (8th Cir. 2001). Therefore, an ALJ's determination concerning a claimant's RFC must be supported by medical evidence that addresses the claimant's ability to function in the workplace. Lewis v. Barnhart, 353 F.3d 642, 646 (8th Cir. 2003). "[T]he ALJ is [also] required to set forth specifically a claimant's limitations and to determine how those limitations affect h[er] RFC." Id.

In the present case, the ALJ determined Plaintiff is able to perform light work with limitations. According to the regulations, "light work" is generally characterized as requiring the use of hands and arms for grasping, holding, and turning objects. Social Security Ruling 83–10, 1983 WL 31251, at *5. A review of the medical record reveals that in January of 2015, Plaintiff reported to Dr. Andrea Bounds that her hands hurt and would cramp. (670-674). At a follow-up appointment with Dr. Bounds in April of 2015, Plaintiff reported arthritic pain in her hands and stiff fingers, that was "somewhat" relieved with the use of Aleve and running warm water over her hands. (Tr. 675-768).

The record revealed that both non-examining medical consultants completed RFC assessments prior to January of 2015, when Plaintiff started complaining about problems with her hands. The record also revealed that Dr. Bounds completed a RFC assessment in January of 2016, indicating that Plaintiff had absolutely no ability to use her hands, fingers and arms to grasp, turn and twist objects. (Tr. 705-708). A complete inability to use her fingers, hands and arms for the above activities is not supported by the medical records or Plaintiff's report that she can do some household chores; help out with coaching a softball team, albeit in a more limited capacity; drive; and spend time on the internet participating in online groups. However, the ALJ did not specifically address Plaintiff's alleged hand limitations and the Court believes remand is necessary for the ALJ to more fully and fairly develop the record regarding Plaintiff's physical RFC.

On remand, the ALJ is directed to address interrogatories to a medical professional requesting that said physician review Plaintiff's medical records; complete a RFC assessment regarding Plaintiff's capabilities during the time period in question; and give the objective basis for the opinion so that an informed decision can be made regarding Plaintiff's ability to perform basic work activities on a sustained basis. The ALJ may also order a consultative examination, in which, the consultative examiner should be asked to review the medical evidence of record, perform examinations and appropriate testing needed to properly

diagnosis Plaintiff's condition(s), and complete a medical assessment of Plaintiff's abilities to

perform work related activities. See 20 C.F.R. § 416.917.

With this evidence, the ALJ should then re-evaluate Plaintiff's RFC and specifically

list in a hypothetical to a vocational expert any limitations that are indicated in the RFC

assessments and supported by the evidence.

The undersigned acknowledges that the ALJ's decision may be the same after proper

analysis. Nonetheless, proper analysis must occur. Groeper v. Sullivan, 932 F.2d 1234,

1239 (8th Cir. 1991).

IV. Conclusion:

Accordingly, the Court concludes that the ALJ's decision is not supported by

substantial evidence, and therefore, the denial of benefits to the Plaintiff should be reversed

and this matter should be remanded to the Commissioner for further consideration pursuant

to sentence four of 42 U.S.C. § 405(g).

DATED this 12th day of July 2018.

|s| Erin L. Wiedemann

HON. ERIN L. WIEDEMANN

UNITED STATES MAGISTRATE JUDGE

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